

# The Unplanned Journey: Challenges of Parents of Children Living with Disabilities in Ghana

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## Abstract

Raising a disabled child is demanding and difficult. Parents may face a variety of challenges due to their child's disability. This may have substantial psychological effects on a parent's life. As a result, this study concentrated on the parents of disabled children at the Don Bosco basic school in Winneba, Ghana's Central Region. Phenomenology was employed in this qualitative investigation as a design strategy. The study included a sample of 6 parents of disabled children. The participants were chosen by convenience sampling. The information was gathered through unstructured interviews, after which it underwent a thematic analysis. Results indicated that parents had favorable opinions of their disabled children. They also experienced considerable problems with money, discrimination, physical exhaustion, a lack of time to seek lucrative work options, and loneliness. Again, the use of family support, social support (churches) and spirituality were these parents' main coping mechanisms. Additionally, the school counselor did not provide counselling to parents of disabled children in coping with the challenges they face. It was recommended that school counsellors are to assess the barriers that parents and their children with disabilities confront in society and offer assistance so that parents would view these issues as an opportunity to continue caring for their disabled children and also uncover any hidden talents in them.

## Keywords

Challenges, Parents, Children, Disabilities, Counselling

## 1. Introduction

Disability happens to almost everyone at some point, and it can last for a short time or a long time. It is part of being human. World Health Organization says that disability is a global public health issue that affects 1 in 7 people around the

world (Bickenbach, 2011). People with disabilities are thought to make up 15% of the world's population, or one billion people. This includes 93 million children and 720 million adults. According to the Ghana Statistical Service (2022), disability affects approximately 3.6% of the Ghanaian population, with physical disability being the most prevalent type. The status quo of disabled children in Ghana is complex and challenging. Children with disabilities in Ghana face significant barriers to accessing education, healthcare, and other essential services. Schools and health care may not be physically accessible, teachers, healthcare workers and parents may lack the training, expertise, skills and resources to provide appropriate support, training and care for children with disabilities. They are often stigmatized and excluded from social activities, and their families may face economic hardship and a lot of challenges as a result of caring for them. Overall, the status quo of disabled children in Ghana highlights the need for greater inclusion and support for this vulnerable population. More research and resources are needed to address the barriers they face and to promote their full participation and inclusion in Ghana.

Most of the time, the birth of a child with a disability surprises the parents and the rest of the family. It may also be hard for the parents. Families with disabled children often deal with trauma, sadness, guilt, anger, rejection, stress, and strain. They are also more likely to commit murder or suicide (Cantwell-Barti, 2009; O'Neill, 2004; Gupta & Kaur, 2010). Parents of children with disabilities must first accept that they could not stop the disaster from happening. Given how much money and time spent on the child, the future looks bleak (Fareo, 2015). Akkoh (2000) and Okeke (2001) say that parents of disabled children need a lot of help from the community, counselors, philanthropists, and governments in order to care for their kids well.

Counseling is usually a private conversation between a client and a professional counselor who helps clients with emotional, social, educational, physical, and career problems. It can also be thought of as a service that helps people find answers to difficult problems and learn how to deal with them. Because of this, parents with special needs children might be targeted to lessen and maybe even get rid of the problems they have. Hence the goal of this study was to find out what challenges parents of disabled children at Don Bosco Basic School in Central Ghana face and how counseling could help them.

The Social Model of Disability theory was used to underpin this study. The theory has it that, disability is not an inherent trait of an individual but is rather a product of social and environmental barriers that limit participation and inclusion in society (Oliver, 1996). The model emphasizes the importance of removing barriers and creating an inclusive society that accommodates the needs of people with disabilities. In this study context, the social model of disability is used to understand the challenges faced by parents with children with disabilities in accessing healthcare, education, and other essential services. Despite the passage of the Persons with Disability Act in 2006, which provides for the protection and promotion of the rights of people with disabilities, parents still face sig-

nificant challenges in accessing services and support for their children with disabilities (UNICEF Ghana, 2013). These challenges are often due to social and environmental barriers such as stigma, discrimination, and inadequate infrastructure.

## 2. Parents' Perception of their Children Living with Disability

According to Snyder (2002), parents have been conditioned to regard their disabled children with "hope," which is a pattern of thought that entails a number of concepts and ways of thinking. It's essential to have faith in doing what is necessary when observing and addressing a problem. The majority of parents, according to Junaidi and Dewantoro (2020)'s study considers that their child's disability is God's will. Their study suggests that the majority of respondents think individuals with disabilities are examples of God's will, being carried out. According to Carrasco et al., (2019), parents of children with disabilities usually have negative views about them. These feelings include pessimism, humiliation, withdrawal, and even rejection of the presence of children with disabilities. Adult children with Down syndrome who were raised in families with high levels of cohesion, harmony, and child-supportive practices displayed more adaptive behavior, fewer behavioral problems, and less social isolation when compared to children with Down syndrome raised in families with the lowest levels of these qualities (Danino & Shechtman, 2012). This study underlines the need for greater support for parents of children with disabilities. Unfortunately, it appears that professionals typically concentrate their attention and aid on the child and their illness. On the other side, a parent's ability to form a close bond with a child with disabilities is greatly impacted by their level of distress, which causes the child to receive less support, require more correction, and exhibit more difficult conduct in general (Osborne & Reed, 2009). Naturally, when parents are successful in fostering a joyful home environment, children with disabilities thrive at their best.

### 2.1. Challenges Parents with Disabled Children Encounter

Challenges are common for parents with disabled children. They face with challenging situations, hardship, loss, and pain. Parents also have a psychological impact on the lives of their children. As a result of raising a child with a disability, parents of these children frequently feel loss, remorse, and loneliness (Azeem et al., 2013). According to Tali's findings from 2002, one of the major challenges for parents of disabled children is money because there is typically insufficient assistance from the government or other external organizations. In Ludlow et al., (2011) study, the majority of parents and caregivers reported finding it challenging to pick up new skills or find and keep a job, and the majority of mothers left their jobs to be able to care for their children. Parents may have emotional and psychological effects as a result of stigmatizing their disabled children, according to (Taderera & Hall, 2017; Bayat, 2014; Tigere & Makhubele, 2019). Ac-

According to these researches, how people treat people and their families is a significant component that makes it harder for people to participate in communal life. The stigmatization of such children among their classmates may have negative emotional and psychological impacts on both the children and their parents. Since disabilities typically affect a child's growth, abilities, and activities, parents of children with impairments worry that their children will depend too much on their parents and siblings for basic needs. Parents with disabled children may experience physical exhaustion and stress due to the additional care they are required to give to these children (Grobler, 2012).

In order to care for their disabled children, some of these parents had to quit their jobs so they could take care of their disabled kids. This has a detrimental effect on their financial situation. This corroborates Cantwell-Barti's (2009) assertion that many parents with disabled children go through financial difficulties because they may not be able to find employment again or because they may have to pay more to support the child. They are also more prone to become socially isolated when friendships change and extended family members withdraw in response to their children's condition (Cantwell-Barti, 2009).

In Ghana, several studies have examined the challenges faced by parents with children with disabilities in Ghana. For instance, Opare and Ayim-Aboagye (2016), Agyemang et al., (2018) and Akudugu et al., (2020) these studies suggest that parents of children with disabilities in Ghana face significant challenges in accessing healthcare services, inadequate information, a lack of support from family members and the community. Furthermore, stigma and discrimination remain pervasive, hindering the inclusion of children with disabilities in society.

## **2.2. Coping Mechanisms Utilized by Parents of Disabled Children**

The ability of a parent to control their own stress and come up with solutions is referred to as coping mechanisms. Concerns regarding their families and their child's future are very prevalent, and they frequently experience emotions of loneliness (Kerr & McIntosh, 2000). Healthy coping techniques help parents manage the demands of raising a child and adjusting to their disability (Staats et al., 2015). Some parents, who are raising disabled children, are able to handle the challenges they face because they have a positive outlook. It helps parents modify and refocus their lives so that they are focused on their child. Parents who have a child with disability commonly state that having that child has given them empathy, hope, love, care, compassion, and a sense of value. They frequently credit both their children and the disabled for their personal growth (Staats et al., 2015).

The existence of siblings can also serve as a coping method for parents of disabled children. Siblings experience a range of feelings and emotions after a kid with special needs is welcomed into the household. It is common for siblings to grow in their empathy and compassion for one another and for those around them. Children might think empathetically about their sibling. Also, they have a

better understanding of their own skills and health (Dyke et al., 2009). Also expressing a sense of family resiliency are siblings. The siblings are better equipped to cope with future stress and adapt to the shifting family dynamics as a result of being placed in this situation. Regarding negative feelings, some parents thought that their other children were humiliated by their sibling's actions in front of their peers. Some parents noticed that their children felt more pressure to care for their disabled sibling (Dyke et al., 2009). These negative feelings may be lessened when a child with special needs is born into a larger household because there are more individuals to help with caregiving.

Another way some parents cope with the challenges of raising disabled children is through the support of their families. It is common for the child's parents to feel stressed in their relationship because their child requires additional care and attention. Family members who are exhausted, depressed, or in need of medical care frequently have to put their own health and welfare at risk in order to meet the child's extraordinary care needs when help is lacking (Cowen & Reed, 2002). In the same way, parents of children with disability frequently depend on their partner for help (Staats et al., 2015). Additionally, parents of children with disabilities use the resources at their disposal as coping techniques to handle the challenges they face. There are frequently resources available to help parents cope with the lifestyle changes brought on by a child with special needs (Cowen & Reed, 2002). Some of these options are counseling and support groups. Resources that families routinely utilize are quite effective at reducing the stress and worry of the caregivers (Cowen & Reed, 2002). Social clubs are one other way some parents of disabled children cope with the challenges they face. Kerr and McIntosh (2000) say that social support "may be a good way for people in this society to deal with stress and loneliness." (p. 310). According to study, parents who can talk about and contrast their experiences with other parents or guardians who are in a comparable situation report reduced levels of stress. In addition to offering emotional, social, and practical support, interacting with other parents of children with disability has stress-reduction effects for the parents involved (Kerr & McIntosh, 2000). Research by Junaidi and Dewantoro (2020) indicates that spirituality and religion are frequently used as coping techniques by parents of disabled children. According to their study's findings, 86.7% of participants thought that God's will was what caused their child's disability. In light of this, spirituality in general might aid parents who are feeling stressed out due to problems with children with disabilities.

### **2.3. Counseling Needs for Parents with Children Living with Disability**

The more severe a child's impairment, the more confused and saddened parents become. When parents experience mental pressure or stress, this stage is known as the crisis phase (Junaidi & Dewantoro, 2020). This means that they lack the assistance and inspiration they require during their crises. Additionally, a claim made by Antwi (2021) was that parents lack the knowledge necessary to effec-

tively manage their disabled children. Additionally, they struggle with choosing the right school setting and career for their children and knowing when to refer their disabled children for diagnostic testing. All of these arguments point to the necessity for encouragement, in-depth assistance, and direction on the part of parents of disabled children in Ghana if they are to take on a therapeutic role in raising their offsprings. Parents can learn techniques to address issues connected to caring for children with disabilities, managing their behavior, and establishing contact and communication with children with disability by counsellors (Degamo & Sano, 2021). Therefore, professionals and other parents with expertise and the ability to get through this crisis phase must be present for this process to be successful. In forums for parents of children with disabilities, this approach is frequently carried out successfully. The precise objective of a school counseling program when dealing with parents of children living with disabilities must be assured by the school counsellor, even though the needs of the parents and the content of the guidance and counseling program will vary from one parent to another. Parents still lack sufficient awareness and information on the disability conditions their children are suffering from, despite recent improvements in this service offering for our young children with disabilities (Antwi, 2021).

Studies have shown that counseling interventions can significantly improve the well-being of parents of children with disabilities in Ghana. For instance, a study by Agyemang et al. (2018) and Dei et al. (2019) found that counseling services helped parents of children with disability to cope with the stress and emotional burden associated with caring for their children and improve their overall well-being.

In sum many disabled children have challenging behavioral problems or demanding physical needs, which can cause great stress for their parents. These parents may as a result not be able to find help in their communities or may have to wait a long time for help. They may also have to deal with uncaring medical professionals who make it hard for them to get help. Some parents express regret about the circumstances their disabled children were put in, according to anecdotal evidence I gathered at Don Bosco Basic School in Winneba Municipal. The sadness that comes with raising a child with a disability is constant. For instance, I made an accidental observation that some of these parents might be mourning over the fact that their child continues to be stigmatized as well as the fact that they have not made scholastic or social progress. Some of these parents are also grieving for themselves and the missed opportunity for personal growth and achievement since every aspect of their lives may be affected and changed. Conducting this study can help to identify these challenges and provide insights into how they can be addressed and also design interventions that better meet the needs of these families. Since there is also paucity of literature on the counselling needs of the studies that have looked at the challenges faced by parents of disabled children there is the need to carry out this study. This study is essential since Ghana is a developing country with a high frequency of disabilities, insufficient healthcare facilities, and little government

support for parents caring for their challenged children. In order to understand the consequences for counseling, this study looked at the challenges faced by parents of disabled children and its counselling needs at the Don Bosco Basic school in Winneba, in Ghana's Central region.

The following research questions were prepared to guide the study:

- 1) How do parents perceive their disabled children?
- 2) What challenges do parents who are caring for their disabled children face?
- 3) How do parents who look after children with disability deal with the challenges they face?
- 4) How do school counselors assist parents of disabled children in overcoming their challenges.

### 3. Method

#### 3.1. Research Design

The qualitative approach was used for this study, which utilized a phenomenological design. The phenomenological design was chosen in accordance with the research questions, and the propensity to enhance comprehension of the challenges faced by parents of disabled children at the Don Bosco Basic school in Winneba from their personal experiences and to project the essential universality of the phenomenon under study.

#### 3.2. Participants

The participants in the study were parents of disabled children attending Don Bosco Basic School in Winneba. Participants were informed about the research purpose, risks, and benefits before they provided their consent to participate in the study. I also made sure that participants' identities were kept a secret and that their privacy and confidentiality were protected. Six parents with disabled children were used as a sample for the data collection. Based on [Creswell and Creswell's \(2018\)](#) assertion that phenomenological research designs can be used with 3 - 10 individuals, this sample was created. However, this analysis takes into account data saturation. This backs up [Charmaz's \(2006\)](#) assertion that one should stop gathering data once the categories (or themes) are saturated, i.e., when more data no longer reveals novel traits or gives novel insights. The convenience sampling technique was judged appropriate due to its simplicity ([Marshall & Rossman, 2016](#)). Additionally, efforts were made to ensure that all participants were parents and fulfilled a number of criteria, such as having a child with a disability, being a parent with a particular status, and residing in a specific location (their wards were schooling at Don Bosco basic school in Winneba).

#### 3.3. Data Collection

To answer the study's research questions, in-depth interviews (unstructured interviews) were conducted with a selected group of participants. These were particularly useful for this study since they prompted open responses from the par-



ticipants and enabled the researcher to elicit more information from them. The parents whose consent was obtained were given ample notice that their participation in the study was completely voluntary and that they had the opportunity to withdraw their consent at any moment during it. The importance of their participation and the pledge to maintain anonymity in the report, as well as the recording and conversion of the interview data into textual data, were thus explained to participants. The first portion of the interview gathered data on the sociodemographic characteristics of the participants, such as gender, the number of children, the number of children with disabilities and their children's diagnoses. The interview process takes 20 to 30 minutes for each participant. Although, it seems the number of participants was limited to some extent, the researcher conducted multiple interviews with some of the participants to gather in-depth information.

### **3.4. Data Analysis**

Data were gathered through recording interviews, which were subsequently manually transcribed first as hasty memos and then again as reflective journal entries, all within a week of the interviews. The purpose of the initial reading was to look for the underlying themes in the dense interview material. Details about the content and issues were looked for in the subsequent readings. This cycle of organizing and reorganizing the data continued until it eventually collapsed into common categories and themes and common patterns. I then classified the data by putting comparable responses in one group, a method characterized by Rubin and Babbie (2011) as dissecting text or qualitative data and searching for categories, themes, or dimensions of data. Themes that emerged from the interview were used to code the data in this study. In keeping with the basic goals of the research, I found themes, categories, and subcategories. I looked at the data over and over again, comparing and categorizing it, and then narrowing the categories into more general phrases. I was able to analyze the results and have a basic understanding of the problems that came up in the interviews. The outcomes include the themes and sub-themes that emerged from the data analysis. For the verbatim transcription of participant data, I used the following codes: P1, P2, P3, ... and P6 to evaluate the themes.

## **4. Findings**

The goal of the study was reached by analyzing the data that had been collected. The results show the demographics of the participants who took part and the themes that came up in the interviews.

### **4.1. Demography of Participants**

Frequency counts and percentages were used to look at the participant's background information.

Two of them, or 33%, were men, and four of them, or 67%, were women. Two



parents made up 33% of the population have 1 - 3 children. There were also three parents (50%) with kids ranging from 4 to 6 and one parent (17%) with kids ranges 7 and up. In terms of the number of parents with disabled children, four (67%) have one and two (33%) have two. No one had three or more kids with disability. Concerning the type of child's diagnosis, one parent (17%) had a child that was diagnosed with cerebral palsy. Two parent (33%) also has a child who suffers from Spina bifida. One parent (17%) had a child who was blind and finally, two parents (33%) had children who had Acquired Brain injury (ABI) (See **Table 1**).

**Table 1.** Demographic information of participants.

		Frequency	Percentage (%)
Gender	Male	2	33
	Female	4	67
Number of Children	1 - 3	2	33
	4 - 6	3	50
	7 and beyond	1	17
No. of Children with Disabilities	1	4	67
	2	2	33
	3 and beyond	0	0
Type of Childs' Diagnosis	Cerebral palsy	1	17
	Spina bifida	2	33
	Blindness	1	17
	Acquired Brain injury	2	33

Source: Field data, (2022).

## 4.2. How Do Parents Perceive Their Disabled Children

In answering research question one, two themes were taken from the participant's narrative accounts and presented to address this research question.

### 4.2.1. Parental Acceptance

A participant shares her story on how she sees her disabled child saying: "*Accepting the diagnosis of my child's condition helps me take care of my child well and makes me realize that this is what God has given me, so I need to take him like that*" [P. 2]. Another participant also has this to say: "*I have accepted that my daughter is unique. At first, I didn't want to, but now I take her everywhere, and by God's grace, I have grown to love her very much*" [P. 5].

The comments imply that these parents had taken their children to the doctor and were informed of their condition. Once more, these parents did not want to questioned God for the child given to them.

#### 4.2.2. Hope

Concerning hope this is exactly what a participant said: *“Even though I face more problems than my peers who don’t have disabled children, I have full faith in my child with a disability. This is because he wasn’t able to finish a number of things before, I took him to school. But as of right now, I know for sure that he can do some things for himself, even if it’s slow. There is hope because he can now do some things that I thought he can’t never do”* [P. 4]. Another participant reaffirmed this opinion by saying: *“I have a high expectation about my child and I know that she will one day become a very prominent person in this country”*[P. 3].

This shows that these parents had conviction in their children, even though their children had a disability. The statements also show that the parents hope their children will be able to do some things that their non-disabled peers can do. The comments also show that despite being aware of their children’s disabilities, these parents remained optimistic that things would turn out well for them. However, it appears as though one of the parents does not have high hopes for the future of his ward. These findings indicated that parents’ attitudes toward their disabled children were favorable.

### 4.3. Challenges Parents of Children with Disabilities Face in Taken Care of Them

To answer this research question, five themes were listed as the top hurdles that parents of children with disabilities deal with.

#### 4.3.1. Financial Difficulties

Regarding financial difficulties, this is what a participant said: *“When we visited the doctor, he suggested that we get him a hearing aid. However, I lack the funds to purchase this hearing aid. So, when it comes to caring for my disabled child, money is my biggest concern and the Government too is also not doing anything to remit us, actually the help is on paper but we are not experiencing it physically”*[P. 1]. In addition, another participant echoed: *“I have to take my child to the hospital for evaluation every three months, but I barely follow this schedule advised by the physicians because of a lack of money”* [P. 4]. *“As you can see, I am unable to leave my disabled child and go to work. That makes it really challenging for me to care of him. Additionally, I am a single mother myself”* [P. 5].

The responses demonstrate that every parent faces financial difficulties when caring for their disabled children in some fashion. These comments demonstrate again that these parents lack the resources to provide their children with the necessary medical care and learning aids respectively.

#### 4.3.2. Single Parenting

This is what a participant has to say under this theme *“Well, my husband left me after I gave birth to this child with a disability, thus I find it tough to take care of my child.”* [P. 5] In furtherance another participant supported this claim and said that *“I am a single parent and due to the severity of my child’s disability, I am not working so I find it very difficult to take care of my child”*[P. 6]. Parent 1

reported that: *“I work, but my pay is quite low, and I frequently struggle to care for my children, particularly the one who is disabled”* [P. 1].

The remarks imply that these parents lack the necessary support of a husband to assist their wards financially.

#### 4.3.3. Discrimination

Under discrimination a participant expressed her opinion as: *“My child occasionally complains a lot about his friends when he gets home. The worst aspect is that certain teachers occasionally make disparaging remarks about my disabled child. My emotions are constantly negatively impacted by these remarks, as well as my child’s* [P. 4]. Another participant also added: *“Hmm... a lot of people don’t want to come closer to us especially when we go for gatherings and this really makes me sad* [P. 3]. This participant also supported the claims by saying that *“I am living in a big compound house and I am very close to two of the women in the house, they got pregnant and they did not come closer to me as they used to do simply because they will also give birth to a disabled child like mine”*[P. 2].

The comments imply that some of the children’s classmates, friends and teachers have verbally abused these disabled children. The responses also demonstrate that people do not want to associate themselves with these children as well as their parents. The remarks also suggest that this condition has a negative impact on the parents and children’s psychological health.

#### 4.3.4. Overtiredness

Concerning overtiredness this is what a participant said: *“Raising a child with a disability will last until I die, so definitely I don’t have much time to rest at all and this is killing me softly”* [P. 6]. Another participant also has this to say: *“The only time I get a little rest is when he goes to school and even that one, I have to do some work because there is never any rest when caring for these children”* [P. 3]. In support of these claims, this is what a participant shared *“While caring for my disabled child, I engage in a variety of activities. For instance, I have to wash his clothes, brush his teeth, bathe him, and transport him to and from school. As a result, by evening I am overly exhausted, and this persists for weeks, months and years”*[P. 1].

These replies from the participants show that parents spend much of their time caring for their disabled children. The amount of time required to care for the children with disability caused considerable frustration. Parental responsibilities include bathing, preparing meals for special diets, feeding, and attending to personal hygiene needs. This shows that the parents had a large number of duties to handle in relation to the disabled child. The remarks also show how exhausted these parents are at the end of the day from these duties.

#### 4.3.5. Isolation

A participant told the tale and said under isolation that: *“I occasionally choose not to participate in certain social occasions. The reason is that if I attend these*

*events or programs, I won't be able to find someone to look after my disabled child for me" [P. 3]. Another parent expressed her viewpoint as: "I hardly ever have time for myself, and taking care of my disabled child has put a stop to my social life and I don't remember the last time I went for a program, I am always indoors" [P. 5]. To support these assertions a parent added: "I can't recall the last time I attended a social event. This is due to the fact that, if I leave, I'm unsure of finding someone who will properly care for my disabled child on my behalf" [P. 4].*

The remarks from these parents suggest that they had to give up their participation in social events in order to care for their disabled children. The parents believed they might not be able to find someone who could properly care for their disabled children when they go to social events. Because of this, these parents had sacrificed their own pleasures in order to provide for their disabled children. In conclusion, it appears from the remarks that these parents were facing difficulties. It also demonstrates that these parents struggled to provide their disabled children with the support they needed to attend school. These comments led to the conclusion that the main challenges faced by parents of disabled children at Don Bosco Basic School in Winneba included financial difficulties, discrimination, single parenting, overtiredness and isolation.

#### **4.4. Coping Strategies of Parents with Children with Disabilities**

Some participants' coping strategies resulted in the following themes; support, children's mental fortitude and spirituality.

##### **4.4.1. Support**

Most of the parents talked about the support they get from their families, churches and others. This is what a parent has to say about support: "*On occasion, if I have to leave for work and get home late, I will ask my sister to pick up my disabled child from school. I give God thanks for the life of this particular sister since she had been quite encouraging helpful from the beginning" [P. 1]. Another participant also shared the following: "Hmmm... I occasionally lock myself in my room and cry. As I'm crying, I ask myself things like, "Why me? What wrongdoing have I done? Am I the only one that is experiencing this issue? In fact, there are times when I want to kill my child and then kill myself. On second thinking, though, I hear a voice asking me to keep moving on and I also have consolation in some of my church members who occasionally support me to care for my child" [P. 2].*

It implies that the parents had a relative who could take over the responsibility of looking after the disabled child while the parent is at work. Additionally, it was evident from the remarks that this sibling had consistently stood by this parent. Again, the responses imply that parents occasionally think about giving up. Once more, it shows that some parents experience suicide thoughts on occasions. It also demonstrates how the parent's emotional instability is as a result of the child's disability. Additionally, it suggests that this mom thinks it is neces-

sary to hold on for a short while as a result of the support from some of her church members.

#### **4.4.2. Children's Mental Fortitude**

Under this theme, a participant emphasized that: *"My disabled child can occasionally carry out some basic daily tasks by himself. For instance, eating on his own and brushing his teeth. This allows me to spend some time caring for the other kids. This gives me the impression that caring for him wasn't a waste of time"* [P. 3]. This was what another participant added "As for me, I was totally disappointed in my child but now this child can say one to two words when in need of something and this has been keeping me on [P. 6].

These comments infer that these parents are not required to carry out all the necessary tasks for their disabled children. It also suggests that these parents take advantage of the chance to care for the other children. These children with disability carrying out some basic daily tasks, is the main motivating factor keeping these parents.

#### **4.4.3. Spirituality**

This is what a participant shared under this theme: *"I constantly rely on God, and doing so keeps me going forward without a lot of stress"* [P. 6]. In furtherance another participant said: *"I really think that God is the source of my life and hope, and I always receive the courage I need to face my challenges day in and out"* [P. 2]. A participant also added "It's been God from day one when I gave birth till this time, he is always with me and my child" [p. 4]. "Any time I faced any challenges I sing praises to my God and the inspirational words in the song keeps me going all the time [P. 1].

This suggests that spirituality is able to help these parents lower their stress levels to cope with their challenges. In conclusion, it appears from these statements that the majority of parents claimed to have developed effective coping strategies for handling the difficulties they experience. These findings led to the conclusion that the usage family and social support, children's mental fortitude, and spirituality were the most important coping techniques used by parents of disabled children at Don Bosco Basic School in Winneba.

### **4.5. Provision of Counselling Needs to Parents of Disabled Children in Adjusting to the Challenges They Face When Caring for Their Disabled Children**

Participants were asked if they have received any guidance or counseling from the school counsellor. Two themes were generated. Lack of guidance or counseling from the school counsellor and receiving guidance. The majority of the participants said they had never received guidance or counselling from the school counsellor. Here are some of the participants' comments supporting this assertion.

#### **4.5.1. Lack of Guidance or Counseling from the School Counselor**

This is what a parent has to say: *"Sincerely, this is the first time I've heard that*

*the school where my ward attends have a school counselor. Meanwhile, I almost daily take my ward to school during the week. Therefore, I can state emphatically that the school counselor hasn't been of any assistance to me let alone to provide me with counseling* [P. 1]. In furtherance a parent echoed clearly that: *"I am aware that there are school counselors in some basic schools. However, I'm unsure if this school has one. I am able to state with confidence that I have not received any help be it guidance or counseling from the school counselor because my child is a disabled"* [P. 4]. As these participants were not aware that there is a counsellor in the school, this is what another participant shared: *"I once spoke with the school counselor. This occurred when my ward once tried to physically harm a peer who was making fun of him. When that occurred, the school counselor was informed of the situation. It was at that point that I learned that this school had a counselor and even with that encounter there was nothing like counselling"* [P. 3]. In furtherance another participant added: *"Although I am aware that this school employs a counselor, she has offered me no guidance or counseling in caring for my child despite his condition"* [P. 2].

These replies suggest that some of these parents were unaware or unsure that their child's school is having a counselor. This indicates that the parents in question did not directly obtain any guidance or counseling from the school counselor. However, it appears from the comments again that some of these parents were aware that there was a school counselor but they also never received any guidance or counseling from her in order to cope with their challenges or any selfcare practices which will help them take good care of their children.

#### **4.5.2. Receiving Guidance or Counseling**

Under this theme only a participant expressed a different viewpoint, stating: *"I am aware that this school has a counselor. She and I have spoken several times about my child's educational requirements. She's actually been helpful from the beginning"* [P. 5].

This remark indicates that this parent sought support from the school counselor regarding the child's disability. Additionally, it implies that, this parent acknowledged that, the school counselor had previously assisted her by providing counseling services.

On this point, it was determined that the school counselor did not offer support to parents of disabled children in navigating the difficulties they confront in caring for their children.

## **5. Discussions**

Per the responses to the study's findings, parents of children with disabilities think well of their children as they have a favorable opinion of them. Despite the hurdles they face in comparison to their peers who are not challenged, they are confident that their children will make significant growth as well. This finding is consistent with [Staats et al. \(2015\)](#) who found that parents frequently feel that having a kid with a disability has made their lives more empathetic, hopeful,

loving, caring, and valuable. They frequently attribute their personal development to their disabled children. Additionally, [Sydner's \(2002\)](#) theory that beliefs and thoughts have very distinct ways of thinking is unwavering with the conclusion that the parent's acceptance and hope for their disabled children constituted a learned thinking pattern. It is crucial for trust to have faith that one will be able to accomplish their goals. All parents who were aware of the disability of their children wished for their child to make progress. The study once again, supports the findings of [Junaidi and Dewantoro \(2020\)](#), who discovered that most parents believe that their child's disability is as a result of God's plan. This indicates that the participants believe that God's will is manifested in their children who have disabilities. Contrarily, [Carrasco et al. \(2019\)](#) highlight the fact that parents of disabled children frequently hold unfavorable opinions about them, including feeling pessimistic, ashamed, reclusive, and even rejecting the presence of disabled children.

From the many accounts of the challenges faced by parents of children with disabilities, the study showed that raising disabled children can be very demanding because there are many challenges that parents must deal with, including emotional and financial strain, a lack of supports, discrimination, the loss of social interactions, and others. These difficulties can lead to psychological issues, depression, physical exhaustion, and a lower quality of life. The difficulties faced by parents of disabled children in the study area are similar to those faced by parents of disabled children in other developing nations. According to this report, the main obstacle faced by parents of disabled children is financial problems. This study backs up [Tali's \(2002\)](#), [Akudugu et al., \(2020\)](#), [Opare and Ayim-Aboagye \(2016\)](#) and [Agyemang et al., \(2018\)](#) researches, which indicated that financial strain is one of the biggest obstacles facing parents of disabled children because there is typically a lack of resources or help from the government and other outside organizations. These participants' limited financial resources are evident in the fact that few of them could pay for paid help, and many could not afford to provide assistive gadgets to help in caring for their disabled children.

The results also corroborate those of [Ludlow et al. \(2011\)](#) who found that the majority of parents and caregivers in their study found it challenging to learn new skills or obtain and hold a career, and that the majority of parents left their employment to be with their disabled children. Once more, [Ludlow et al. \(2011\)](#) found a similar response, with 11 out of 20 parents reporting unfavorable treatment of their disabled children. They claimed that the most challenging component of the difficulties they have as a result of their disabled children is dealing with people's reactions and judgments. This result is again consistent with observations made by [Taderera and Hall \(2017\)](#), [Bayat \(2014\)](#), [Tigere and Makhubele \(2019\)](#) and [Akudugu et al., \(2020\)](#) who indicated that stigmatizing children with disability could have an emotional and psychological impact on parents as well as the children. According to these researches, the children's treatment by others is a debilitating factor that makes it more difficult for them to engage in



communal life. This implies that the majority of parents cited stress, prejudice, and financial hardships as their main concerns when caring for children with disabilities. In addition, the participants to this study noted that parents, particularly women, become physically weary when caring for their disabled children. It takes a lot of time to care for children with disabilities, and the parents usually the mothers often have to take care of their other children as well. This leaves little time for self-care. The majority of the parents in this study claimed that taking care of their disabled children leaves them with little free time and prevents them from participating in social activities.

Per the various narratives of the strategies of parents with disabilities, it was discovered that these parents were found to employ support from family and church, spirituality, and mental fortitude to overcome problems they face when caring for these children. This conclusion is in line with that of (Staats et al., 2015). They discovered that parents with disabled children frequently rely on their significant others for support. Parents of children with disabilities have been shown to use various facets of spirituality and religion as coping methods. According to the study's findings, parents believe that God's will is what caused their child's disability. Parents who are under stress due to issues with children who have disabilities may find relief via spirituality in general. This finding again is consistent with the findings of Kerr & McIntosh (2000), who discovered that having hope is a positive perspective that some parents possess that aids them in overcoming the difficulties they encounter as a result of raising disabled children.

Finally, it was revealed that, most parents did not receive any counseling from the school counselor in coping with the obstacles they experience and how they can take good care of their disabled children. This study backs up Antwi (2021) that, despite recent advancements in counseling services for challenged children, parents still do not have enough knowledge and understanding of the difficulties their children are experiencing. She also mentioned that due to a lack of counseling on the part of counselors, parents lack the knowledge required to manage their children effectively because they have trouble providing for their own needs, selecting the best educational environment and career for their children, and knowing how to refer their disabled children for diagnostic testing.

The finding conflicts with that of Degamo & Sano (2021), Agyemang et al. (2018) and Dei et al. (2019) who contend that parents can receive counseling and develop strategies for dealing with their own problems related to raising children with disabilities, regulating their behavior, and making contact and communicating with such children. Here, it is determined that counselors must assist parents in learning strategies and developing certain abilities for aiding their disabled children.

## **6. Conclusion and Recommendations**

In conclusion, the study has produced some pertinent findings that might foster wholesome environments to enhance the quality of life for parents of children

with disabilities. The study's conclusions alert interested parties, counselors, and educators to the numerous difficulties, anxieties, and concerns faced by parents of disabled children. The study has generally been helpful in identifying some challenges that affect counseling needs of parents of children with disabilities because most of the parents were unaware of the school counselor. Parents of disabled children fighting their own battles to raise their children. There are no resources accessible from either the public or private sectors. So, in a nutshell, it may be said that it takes time and effort to raise a child with a disability. It is anticipated that the study's findings would be taken seriously right away so that parents in Ghana who need counseling for their special-needs children can enjoy raising them. The primary issues are related to financial instability and a lack of understanding about resources and programs for their disabled children. Participants' lack of understanding may be a sign that policy implementers at the local level are not adequately educating the public about policies.

The findings and conclusions of the study have led to the following tactical recommendations:

The guidance and counseling coordinator of the Effutu Municipal Education Service should orient and assign the school counsellor the task of educating parents about the idea that disabled children are full of hope and that parents should accept them wholeheartedly and continue providing for them. Furthermore, the Effutu Municipal Education Service should charge the headteacher, counselor, special education teacher, and teachers of Don Bosco basic school with the responsibility of making disabled children feel comfortable by ensuring that other children do not discriminate against them. Additionally, the school counsellor should raise awareness of the hazards of discriminating against children who have disabilities because it has a negative impact on both the children and their parents. There is also the need to educate and instruct religious leaders to urge their followers not to discriminate against people with disabilities but rather to support such parents, as their assistance greatly reduces the strain of raising disabled children as well as the parents.

Once more, the government should provide accessible healthcare and educational facilities to lessen the burden on parents of disabled children from Winneba Municipal healthcare providers and education respectively. Also, creation of social support groups by counsellors in collaboration with Ghana psychological Council and the Ministry of Gender and social welfare is very laudable. These support groups will be essential in providing psychosocial help to parents of disabled children. By exchanging ideas and caring for one another emotionally, parents can lessen the burden on their shoulders. Counselors should assist in establishing these support groups on social media platforms like Facebook and WhatsApp to take into account the struggles of parents who see their children's disabilities as a way to discover other potential in their children.

Further, education and vocational training programs be developed by the government to support parents of children with disabilities in Ghana since parents faced challenges in providing for their children's basic needs and that these

programs could help parents develop the skills necessary to support their children and improve their economic status.

Last but not least, training for parents on how to deal with issues and problems related to raising a child with disability should be provided by the Municipal guidance and counseling coordinator and the school counselors. Although raising children with disabilities can be stressful, parents can improve their parenting skills by learning proper coping mechanisms and stress management techniques as identified by these parents from counselors and psychotherapists.

This study suggests that these parents face numerous difficulties in raising their disabled children in Ghana. Therefore, it is crucial for counsellors to provide tailored services that can help parents manage the stress associated with caring for a child with a disability, improve their economic status, and enhance their ability to support their children. Counselors therefore need to play a vital role in supporting parents of children with disabilities in Ghana by providing them with emotional and psychological support. Counseling services that can help parents to manage their stress levels, cope with the challenges of caring for a child with a disability, and enhance their ability to support their children's development. Most importantly, counselors can also help parents to navigate the healthcare and social support systems, provide information on available resources, and advocate for their needs.

## **7. Implication for Counseling**

Key counseling implications based on the study's findings include the following:

First of all, parents of children with disability need more than just advice; they also need professional help from trained counselors who can develop and implement supportive educational plans in schools and support parents in coping with their feelings regarding the issues related to the disability as well as help them better understand and accept the disability the child has.

The second is educating parents about behavior management techniques and offering group counseling to parents by the municipal guidance and counseling coordinator and the school counselor, which can help them adjust socially and connect with other parents going through similar difficulties. This would provide them a platform to discuss their experiences and more freedom to connect with other parents of children with disabilities, which can lessen the social stigma these parents currently face.

Third, assisting parents of children with disabilities, particularly in the area of the opportunities that are available to their children, this is focused on cognitive restructuring, where the cognitive ability of the parents is enhanced to cope with various challenges confronting the children. The explanation for this is that some of these children can be taught to excel in any field that people without disabilities can work in.

In order to give parents, the opportunity to have conditions of worth, self-awareness, and emotional and psychological wellness, guidance and counselling

services should be organized by the National, Municipal guidance and counseling coordinator and the school counselors countrywide. Due to the necessity of making accommodations for their special needs, children with disabilities may occasionally feel alone and unable to pursue careers or engage in social activities. To avoid social stigma, some parents might be willing to care for their child at home rather than enrolling them in school. This suggests that counsellors must provide more support.

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## Conflicts of Interest

The author declares no conflicts of interest regarding the publication of this paper.

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